

JTCVS Disclosure Statement • E-mail: jtcvs@aats.org • Fax: 978-524-8890

In the interest of unbiased scientific reporting, our primary obligation to our readers, the Editors of *The Journal of Thoracic and Cardiovascular Surgery* require **all authors to fully disclose all direct or indirect financial relationships, including any relationship of the authors or their immediate family, that would lead a reasonably well informed person to believe that the authors' work could be affected by their private interests.** If the Editors deem the information of significance, they will disclose the relationship on the title page of the manuscript. Please add a separate sheet for any information that does not fit on this page. **[Please print.]**

Name: _____ Manuscript title or number: _____

Does your manuscript describe a product or service from which increased sales would in any way benefit you or any member of your immediate family? If so, please indicate how: _____

List companies from whom you or any member of your immediate family received fees for consulting or serving on advisory boards (per year, for the past 2 years or the known future)

| | None | <US\$10,000 | >US\$10,000 |
|-------|-------|-------------|-------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Equity ownership/stock options (publicly traded or private firms, excluding mutual funds)

| | | | |
|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Lecture fees from speaking at the invitation of a commercial entity (per year, for the past 2 years or the known future)

| | | | |
|-------|-------|-------|-------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Are you, or any member of your immediate family, employed by the commercial entity that sponsored the study that is the subject of the manuscript? Yes____ No____

Do you, or any member of your immediate family, have grant support from any commercial entity that might benefit from this report? Yes____ No _____ If yes, complete the next section.

Current grant support sources, **excluding** nonprofit/government entities:

| | Total Amount | Years Covered |
|-------|--------------|---------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Do you, or any member of your immediate family, have patents or royalties from, or serve as an expert consultant, board member, or officer, or provide other services for a commercial entity that might be affected by this report? Please provide a brief description: _____

Please provide names, addresses, and affiliations of all undisclosed writers who have contributed to this submitted manuscript: _____

Signature: _____ Date: _____